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CONFIRMATION NO. 8661

SERIAL NUMBER 10/540,917	FILING OR 371(c) DATE 07/21/2005 RULE	CLASS 033	GROUP ART UNIT 2859	ATTORNEY DOCKET NO. 05087
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APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/IB02/05666 12/30/2002

**** FOREIGN APPLICATIONS *******

Chf
Chf **NONE**

**** SMALL ENTITY ****

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no				
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>Christopher J. H.</i> Examiner's Signature	Initials			
STATE OR COUNTRY	ITALY	SHEETS DRAWING	6	TOTAL CLAIMS	13
				INDEPENDENT CLAIMS	1

ADDRESS

23338

TITLE

Device for goniometric measurements

FILING FEE RECEIVED 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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